| AMENDMENT TRANSMITTAL LETTER | | | Docket No. BSTB-20302/38 | |
|---|---|---|---|---|
| Application No. 10/680,747-Conf. #5365 | Filing Date January 7, 2003 | | Examiner L. A. Gall | Art Unit 3676 |

Applicant(s): Elena Caseilini et al.

Invention: KEY COVER FOR A SHARED KEY

### TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

| CLAIMS AS AMENDED | | | | | | |
|---|---|---|---|---|---|---|
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | | |
| **Total Claims** | 18 | - 20 = | x | | | |
| **Independent Claims** | 3 | - 3 = | x | | | |
| Multiple Dependent Claims (check if applicable) | | | ☐ | | | |
| Other fee (please specify): Extension for response within first month | | | | | 60.00 | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | 60.00 | |

☐ Large Entity  ☒ Small Entity

☐ No additional fee is required for this amendment.

☐ Please charge Deposit Account No. ___07-1180___ in the amount of $ _____ .
A duplicate copy of this sheet is enclosed.

☐ A check in the amount of $ ___60.00___ to cover the filing fee is enclosed.

☒ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. ___07-1180___
as described below. A duplicate copy of this sheet is enclosed.

　☒ Credit any overpayment.

　☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

/Avery N. Goldstein, Ph.D./ _____　　　　　Dated: ___February 19, 2007___
Avery N. Goldstein, Ph.D.
Attorney/Agent Reg. No.: 39,204

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